

CONTACT: Kansas Office of the Secretary of State

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Above space is for office use only.



**INSTRUCTIONS**: All information must be completed or this document will not be accepted for filing. **Please read instructions before completing**.

1. Business entity ID number: This is not the Federal Employer ID Number (FEIN)	
2. Name of the limited partnership: Name must match the name on record with the Secretary of State	
3. The limited partnership ame	its certificate as follows:
4. I declare under penalty of pethat I have remitted the require	ry under the laws of the state of Kansas that the foregoing is true and correct and ee.
Signature of general partner	Date (month, day, year)
Signature of new general partner (if amendment adds a new general pa	Date (month, day, year)
i Instructions:	
1. Submit this form with the	35 filing fee.
STAY UP-TO-DATE ON YOUR OF	35 filing fee.  NIZATION'S STATUS, ANNUAL REPORT DUE DATE AND CONTACT ADDRESSES BY GOING TO LINKS, SELECT SEARCH BUSINESS ENTITY INFORMATION.